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Bib Data Sheet

CONFIRMATION NO. 5070

SERIAL NUMBER 10/802,798	FILING DATE 03/18/2004 RULE	CLASS 399	GROUP ART UNIT 2854	ATTORNEY DOCKET NO. 46276
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

REPUBLIC OF KOREA 2003-80685 11/14/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/03/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY KOREA, REPUBLIC OF	SHEETS DRAWING 3	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 2
Verified and Acknowledged Examiner's Signature	 Initials				

ADDRESS

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TITLE

Multifunction product

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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